

Service Area 7 QIC Meeting Minutes February 14, 2010

DMH UPDATE

Ana suarez, district chief reports that the budget is good. It is likely that next year, dmh will have a shortfall of 20 million, but that can change at any time.

CHALLENGE GRANT

3 organizations were chosen for a pilot project on the implementation of health care reform in 2014. Those agencies are la care, dept of health services and exodus recovery. Dmh is asking the federal government for 3 million dollars for the pilot. Dmh is now doing more and more collaboration with other programs inclusive of physical care and the pilot finding will show how well we are integrating physical care, mental health care, substance abuse and other ancillary services.

HWLA

We have 2 providers, alma and enki in sa 7 that are hwla providers, inclusive of rio hondo. These providers are serving tier 2 clients which are basically the clientele that are pei, lower level of care.

Tier 1 clients which are the most chronic and persistently ill mental health clients require that dmh continue to serve them. I'd like to hear from misty and michelle regarding how hwla is going in your agencies.

Dr. YoKo Sugihara has put together an Emergency Response Pilot. The team is always contacted when a child is hospitalized. It appears that there was a situation where DCSF went out to assess a child and left the child in placement and the child died shortly thereafter which is the impetus for the Emergency Response Pilot.

Now a memorandum of understanding was signed by DCSF and DMH that 2 LPS designated persons go out to assess the child. Yoko's unit, the Hospitalization Unit follows up to see how the child is doing. This project is open to contract providers. Yoko's unit is tracking children and a concern is that Service Area 3 has had an increase in placement for kids using emergency services at DMH instead of their own. This increase started in July. Yoko's unit will track who is the child, why are they being called. DCSF will have to respond in 30 minutes. One child had 5 repeat hospitalizations one after another. So this is expedited Response Call.

Quality Assurance Update

Interdepartmental is working on 5010 Update NPI/duplicate rendering Provider clean-up and changes to inpatient procedures and facility types.

County Coalition Tx Plan

QA Bulletin – Misty Allen

Clinical record Updates – Kari

A lot of the QIC Chairs are requesting training for MAT, HWLA

There is a basic documentation training for QA Managers from each agency which is scheduled for April 9, 10:30-5:00 PM. so Interdepartmental QA is interested in a list of QA Managers for each agency.

Interdepartmental QA is working on QA Guidelines and a chart review tool that will be used by all the directly operated programs. Once the tool is approved, I believe contract providers can get copies, but please remember that you need to go by your agency's QA guidelines and you cannot just begin using the new DMH tool. I will have more on the tool by the next meeting.

QUALITY IMPROVEMENT UPDATE

Managed Care Division is working on RH Cohort 2 (Reduce Hospitalization Rates- This is a QI project related to constant repeaters sent to hospitals . They will also be looking at problematic discharge planning where the hospital does not connect with the client's clinic to discuss discharge planning, inclusive of treatment and medications. Often times, clients are only provided with the name and telephone of the outpt. clinic by hospital staff and there is no other communication. They are also going to be looking at the hospital contract templates to see what is required of them in terms of these issues.

Quality Improvement Project – Denise

Recurring theme in Client Flow Project that you-providers want more training and more information on community supportive funding programs such as CBOs which are not connected to DMH.

Audit Updates – Serenity was reviewed by the Auditor/Controller's office last month and I believe they are now closed. Para Los Ninos is scheduled on February 22

COUNTY PERFORMANCE OUTCOME SURVEYS

Dr. Byer

In the past, if a Legal Entity has several offices in different service areas, they had to complete a survey for each program in each area and the program would return it to the service area where the program resided. I want to know if this procedure is still being followed.